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PTO/SB/81 (02-01)

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/809,468
Filing Date	March 15, 2001
First Named Inventor	Michael Wholey
Title	METHOD AND APPARATUS *
Group Art Unit	
Examiner Name	
Attorney Docket Number	180431-00015

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Address	Pietragallo, Bosick & Gordon				
Address	One Oxford Centre, 38th Floor, 301 Grant Street				
City	Pittsburgh	State	PA	Zip	15219
Country	US				
Telephone	(412) 263-4340	Fax	(412) 261-0915		

I am the:

☒ Applicant/Inventor.
☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

SIGNATURE of Applicant or Assignee of Record

Name	Michael Wholey
Signature	
Date	7/25/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 3 forms are submitted.

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SIGNATURE of Applicant or Assignee of Record

Name

Mark H. Wholey

Signature

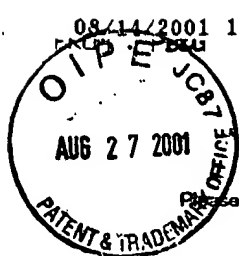
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7/23/01

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POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number	09/809,468
Filing Date	March 15, 2001
First Named Inventor	Michael Wholey
Title	METHOD AND APPARATUS *
Group Art Unit	
Examiner Name	
Attorney Docket Number	180431-00015

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SIGNATURE of Applicant or Assignee of Record

Name

Petra Wholey

Signature

Date

July 25, 2001

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PTO/SB/82 (10-00)

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Application Number	09/809,468
Filing Date	March 15, 2001
First Named Inventor	Michael Wholey
Group Art Unit	
Examiner Name	
Attorney Docket Number	180431-00015

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I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name

Michael Wholey

Signature

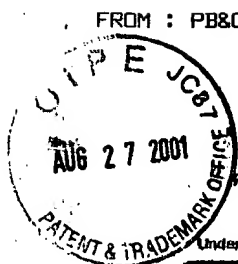
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Application Number	09/809,468
Filing Date	March 15, 2001
First Named Inventor	Michael Wholey
Group Art Unit	
Examiner Name	
Attorney Docket Number	180431-00015

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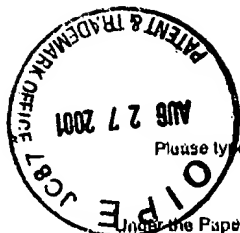
SIGNATURE of Applicant or Assignee of Record

Name	Mark H. Wholey
Signature	<i>Mark H. Wholey</i>
Date	7/23/01

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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Examiner Name	
Attorney Docket Number	180431-00015

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8-16-01 0400

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	09/809,468
	Filing Date	March 15, 2001
	First Named Inventor	Michael Wholey
	Group Art Unit	
	Examiner Name	
Total Number of Pages in This Submission	Attorney Docket Number	180431-00015

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): -return postcard
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	Alan G. Towner Pietragallo, Bosick & Gordon
Signature	
Date	August 24, 2001

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